

New Jersey Department of Education  
**Improving America's Schools Act (IASA)**  
**Title VI - Class-Size Reduction Initiative**  
 Fiscal Year 2000

SUBMIT TO  
 COUNTY OFFICE OF  
 EDUCATION AND  
 OGMD

**Title Page**

<input type="checkbox"/> <b>INDIVIDUAL LEA APPLICANT</b> PROJECT CODE: CSR ____ -00	<input type="checkbox"/> <b>CONSORTIUM APPLICANT</b> PROJECT CODE: CSR ____ -00C	<input type="checkbox"/> <b>PARTICIPANT IN CONSORTIUM</b> LEA CODE: ____
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1. LEA:	
2. Chief School Administrator:	2a. Tel. #: <span style="float: right;">FAX #:</span>
3. Project Director:	3a. Tel. #: <span style="float: right;">FAX #:</span>
4. Address:	5. County Name:  County Code:
6. Project Duration: 9/1/99 to 8/31/00	7. Board Approval Date for Application Submission:

PROGRAM	ALLOCATION AMOUNT 8a	NEW TEACHER STARTING SALARY 8b	AMOUNT CONTRIBUTED TO CONSORTIUM 8c	TOTAL FUNDS REQUESTED 8d
<b>CLASS-SIZE REDUCTION INITIATIVE</b>				

- ◆ *If the LEA is requesting the funds in item 8d, the allocation amount in item 8a must be greater than or equal to the starting salary of a new teacher (excluding benefits) in item 8b.*
- ◆ *If the allocation amount in item 8a is less than the starting salary of a new teacher (excluding benefits) in item 8b the LEA must form a consortium, refuse the funds or submit waiver request to USDOE. (See directions)*

**CLASS-SIZE INFORMATION**

School Name; list District if other than applicant district	1999 – 2000 CLASS SIZE * <u>WITHOUT</u> CSR FUNDS Grades					1999 – 2000 IMPACT ON CLASS SIZE* <u>WITH</u> CSR FUNDS Grades				
	1	2	3	Other	Other	1	2	3	Other	Other

\* As defined by the 1998 NJ School Report Card as “the average number of students assigned to a regular classroom.”

## DIRECTIONS FOR COMPLETING TITLE PAGE AND ASSURANCES

- Project Code: Enter the LEA's 4-digit code.
- Items 1-5: Complete all identifying information.
- Item 6: Project Duration: 9/1/99 to 8/31/00
- Item 7: Enter the date of the board of education's approval for the submission of this application. The submission of the actual board of education resolution is not required unless the application is submitted prior to the board approval date.
- Item 8a: Enter the amount of total allocation indicated on allocation notice. **If the LEA is requesting the funds in item 8d, the allocation amount in item 8a must be greater than or equal to the starting salary of a new teacher in your agency indicated in item 8b.**
- Item 8b: Indicate the 1999-2000 starting salary (excluding benefits) of a new teacher in your agency. If your LEA is in contract negotiation and salaries are not final, use the most current salary.
- Item 8c: Enter the amount being contributed to the consortium. **If the allocation amount (item 8a) is less than the starting salary of a new teacher in your agency (item 8b) the LEA must:**
- **form a consortium,**
  - **refuse the funds (if refusing funds, board resolution and submission of the attached refusal form is required),**  
**or**
  - **receive approval for a waiver from the United States Department of Education.**

**NOTE:** NJDOE has submitted a waiver to the USDOE (see attached). If your district would like to participate in this waiver, submit the attached Waiver Request Form to OGMD and your County Office of Education. If you are requesting the waiver of a requirement other than the one submitted by the NJDOE, your district must follow the waiver process indicated in the FY 2000 IASA Guidelines, Section VII, pages 12 and 13.

Item 8d: Enter the amount of funds being requested.

### CLASS SIZE INFORMATION SECTION (add additional pages if necessary)

**School Name:** Indicate the name of the school where newly hired teachers will be located due to Class-Size Reduction funding.

**Class Size without CSR Funds:** Indicate the class sizes for the 1999-2000 school year without CSR funding in grades 1 – 3 **or** other targeted grades that will be affected by the Class-Size Reduction funding. (See Federal Guidance, Section F4)

**Impact on Class Size with CSR Funds:** Indicate the estimated class sizes targeted by Class-Size Reduction funding for the 1999-2000 school year after the Class-Size Reduction plan has been implemented.

### Assurances and Certification

Assurances and certification are required for receiving funds under the Class-Size Reduction Initiative program. This certification must be signed and dated by the Chief School Administrator

## **DIRECTIONS FOR COMPLETING TITLE PAGE AND ASSURANCES**

### **CONSORTIUM APPLICATIONS**

**All Participating LEAs** in the consortium (including the consortium applicant) must complete an individual Title Page and an Assurances Page to be submitted with the consortium application. Consortium applicants must contribute all of their own funds to the consortium.

1. Check participant box, enter the LEA's 4 digit LEA code and complete all identifying information. (items 1 – 5)
2. Enter the date of board approval to contribute allocation(s) to the consortium (item 7). A board resolution is required if the application is submitted prior to board approval.
3. Complete items 8a and 8c for the funds contributed to the consortium. (8c must equal 8a)
4. Enter 0 in item 8d.
5. Send the completed Title Page and signed assurances to the consortium applicant.

*Class-Size Information section should **not** be completed on participant pages.*

**The Applicant LEA** must complete a summary Title Page **summarizing** all funds requested for the consortium.

1. Check Consortium Applicant box, enter the LEA's 4 digit LEA code and complete items 1-5.
2. Enter the Board Approval date for the submission of the consortium application (item 7). A board resolution is required if the application is submitted prior to board approval.
3. Do not complete Item 8a on summary Title Page.
4. Indicate in Item 8b the 1999-2000 starting salary (excluding benefits) of a new teacher in your agency. If your LEA is in contract negotiation and salaries are not final, use the most current salary.
5. Enter 0 in item 8c.
6. Summarize the amounts indicated in item 8c of the title pages from all participating LEAs (including the applicant) and enter that total in item 8d on the applicant summary page.
7. Complete Class-Size Information section indicating the school name and district.

**NOTE: For more information regarding consortiums, see the Fiscal Year 2000 IASA Consolidated Subgrant Application Guidelines, Page 16.**

### **Assurances and Certification**

Assurances and certification are required for receiving funds under the Class-Size Reduction Initiative program. This certification must be signed and dated by the Chief School Administrator.

New Jersey Department of Education  
**Improving America's Schools Act (IASA)**  
**Class-Size Reduction Initiative**  
Fiscal Year 2000

**LEA:** \_\_\_\_\_

**Project Code: CSR-**\_\_\_\_\_-00

**Assurances and Certification**

The applicant hereby assures the NJDOE that:

1. All policies, procedures, programs and administration in the LEA are consistent with the Improving America's Schools Act of 1994 (IASA), the U. S. Education Department's General Administration Regulations (EDGAR), and other applicable statutes, regulations, program plans and applications.
2. These funds will be used according to the approved application, program plan and in compliance with the stated use of funds in IASA, Section 307 (c) (1) *et seq.*
3. Funds will be used only to supplement, not supplant, state and local funds that, in the absence of such funds, would otherwise be spent for such activities.
4. If funds are used for professional development activities, nonprofit private schools are provided with the opportunity to equitably participate in such activities.
5. An annual report to parents, the general public and the NJDOE on student achievement will be produced by the LEA as a result of hiring new teachers and reducing class size.
6. Not more than three percent of such funds will be used for administrative costs by the LEA.
7. If funds are to be used to reduce class size in grades K-12, the class size ratio in grades 1-3 is already at 1:18.
8. The LEA will request waivers of any state or federal requirements necessary to carry out its Class-Size Reduction plan.
9. The Early Implementation Report must be sent to NJDOE at the time of application submission and forwarded to Westat by August 1, 1999.

**COMPLETE AGREEMENT BELOW ONLY IF IN CONSORTIUM:**

<p><b><i>Consortium agreement:</i></b> _____ has been designated as the applicant agency for this project. As a participating agency, I have agreed to the implementation of activities, utilization of funds and sharing of costs.</p>
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**I certify that the information contained in this application is correct and complete and that the LEA has authorized me, as its representative, to give the above Assurances and to file this application.**

\_\_\_\_\_  
**Typed Name of Chief School Administrator**

\_\_\_\_\_  
**Signature of Chief School Administrator**

\_\_\_\_\_  
**Date**

New Jersey Department of Education  
**Improving America's Schools Act (IASA)**  
**Class-Size Reduction Initiative**  
Fiscal Year 2000

**Program Plan**

LEA: \_\_\_\_\_ County: \_\_\_\_\_ Project Code: CSR - \_ \_ \_ \_ - 00

**IASA-GOAL I:** Create the opportunity for all students to meet high-quality academic standards.

OBJECTIVES	ACTIVITIES	EVALUATION METHOD

*Use additional sheets, as needed*

## Directions for Program Plan

### USE OF FUNDS:

- ◆ If the teacher/student ratio in grades 1-3 is greater than 18 to 1, describe the plan to reduce class size by hiring new highly qualified teachers. A minimum of 82% of the funds must be used for this purpose. Describe the recruitment and training activities for hiring the new teacher(s). Describe the LEA plan to ensure that the newly hired teacher(s) are certified within the shortest possible time period. (Attach additional pages, if needed)
- ◆ If the teacher/student ratio is less than or equal to 18 to 1 in grades 1-3, provide documentation on and describe the plan to reduce class size in grades K-12 by hiring highly qualified teachers and/or to carry out activities to improve teacher quality. (Attach additional pages, if needed)
- ◆ Describe the plan for professional development activities that may be offered to all teachers and must be offered to private schools and how these activities are coordinated with those funded under Title II of the Higher Education Act. Describe the plan for the testing of new teachers to meet state certification requirements. Fifteen (15%) maximum of the funds may be used for this purpose. (Attach additional pages, if needed)
- ◆ Three percent (3%) maximum of the funds may be used for administration.

### 1. GOALS:

There are two goals included in the Class-Size Reduction Application. Objectives and activities should be listed under the appropriate goal. **All applicants must address Goal I.**

### 2. OBJECTIVE(S):

Describe the measurable objective(s) that the LEA has identified to address the goal. Each objective must specify the following information:

- a) the target population (students or teachers)
- b) the outcome to be achieved (performance or behavior indicators)
- c) the date by which the outcome will be achieved.

The target population for Goal II objectives must be teachers, administrators, and/or in some cases other school staff or parents. However, one of the benchmarks/indicators for each Goal II objective must be the improvement of student achievement.

### 3. ACTIVITIES:

List the activities that will be implemented to achieve the objectives. For each teacher hired, indicate grade level, regular or special education, project and FTE percent. Indicate the name of private schools participating in professional development activities, if applicable.

### 4. EVALUATION METHOD:

List the evaluation method that the LEA will use to measure progress towards achieving the *goals/objectives and the success of the project*. The evaluation plan should measure the objectives. Describe the LEA plan to produce an annual report card to parents, the general public and the NJDOE. Provide academic (pre-and post-testing) and nonacademic information (attendance, discipline, promotion trends, instruction time, student/teacher relationship, socialization, teacher retention/job satisfaction).

### CODING - Use the following outline format:

Goals (I, II); Objectives (A,B,C...); Activities (1,2,3...); Evaluation (A1, A2, B1...)

(Example - activity IB2 refers to Goal I, Objective B, Activity 2)

(Example - evaluation A2 refers to the second evaluation method for objective A)

New Jersey Department of Education  
**Improving America's Schools Act (IASA)**  
**Class-Size Reduction Initiative**  
Fiscal Year 2000

**Program Plan**

LEA: \_\_\_\_\_ County: \_\_\_\_\_ Project Code: CSR - \_ \_ \_ \_ - 00

**IASA-GOAL II:** Improve the quality of instruction through professional development that will help students meet challenging academic standards.

OBJECTIVES	ACTIVITIES	EVALUATION METHOD

*Use additional sheets, as needed*

New Jersey State Department of Education

**Class-Size Reduction Initiative**

Fiscal Year 2000

**Budget Statement**

LEA: \_\_\_\_\_

COUNTY: \_\_\_\_\_

PROJECT CODE: CSR \_\_\_\_\_ -00

EXPENDITURE CATEGORY	FUNCTION & OBJECT CODES	TITLE VI CLASS-SIZE INITIATIVE			
		PROGRAM COSTS 82% Min.	PROFESSIONAL DEVELOPMENT 15% Max.	ADMINISTRATION 3% Max	TOTAL
<b>INSTRUCTION</b>					
Salaries of Teachers	100-101				
Other Salaries for Instruction	100-106				
Purchased Prof. & Tech. Services	100-300				
Other Pur. Serv. (400-500 series)	100-500				
Tuition	100-560				
General Supplies	100-610				
Textbooks	100-640				
Other Objects	100-800				
<b>SUBTOTAL INSTRUCTION</b>					
<b>SUPPORT SERVICES</b>					
Sal. of Supervisors of Instruction	200-102				
Sal. of Program Directors	200-103				
Sal. of Other Professional Staff	200-104				
Sal. of Secretarial & Clerical Assist.	200-105				
Other Salaries	200-110				
Personal Serv. - Employee Benefits	200-200				
Purchased Prof. - Ed. Services	200-320				
Other Purchased Prof. Services	200-330				
Purchased Technical Services	200-340				
Rentals	200-440				
Contracted Services - Transport. Other Than Betw. Home & School	200-516				
Travel	200-580				
Other Pur. Serv. (400-500 series)	200-590				
Supplies and Materials	200-600				
Indirect Costs	200-860				
Other Objects	200-890				
<b>SUBTOTAL - SUPPORT SERVICES</b>					
<b>FACILITIES ACQ &amp; CONSTR SERV</b>					
<b>Buildings (Use charge)</b>	400-720				
Instructional Equipment	400-731				
Noninstructional Equipment	400-732				
<b>SUBTOTAL - FAC ACQ &amp; CONSTR</b>					
<b>SCHOOLWIDE PROGRAMS</b>	520-930				
<b>TOTAL</b>					

LEA-Business Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_



## **DIRECTIONS FOR COMPLETING THE BUDGET STATEMENT**

**NOTE: Refer to the Uniform Minimum Chart of Accounts distributed by the Office of Finance for specific instructions regarding classification of expenditures within category headings. Use whole numbers only.**

- Complete the LEA name, county name and 4-digit LEA code.
- Indicate the amount budgeted in each of the expenditure categories in the appropriate column for the activities supported through this project.
  - **PROGRAM COSTS:** A minimum of 82% of each LEA's award must be used to recruit, hire and train certified classroom teachers in order to reduce class size in grades one through three (or in other grades or subjects for LEAs that do not serve grades one through three).
  - **PROFESSIONAL DEVELOPMENT:** A maximum of 15% of each LEA's award may be used for (1) testing new teachers for academic content knowledge and to meet State certification requirements that are consistent with Title II of the Higher Education Act of 1965 (Title II); or (2) providing professional development to teachers consistent with Title II.
  - **ADMINISTRATION:** No more than 3% of each LEA's award may be used for local administration.
- Indicate in the Total Column the total amount requested in each expenditure category. The budgeted amounts in each category on the Project Budget Statement must match the subtotals for the expenditure categories by funding source itemized on the Budget Detail.
- The Total line must be equal to the amount indicated in Item 8d on the Title Page.
- Signature of the LEA's Business Administrator and date are required.

New Jersey Department of Education  
**Class-Size Reduction Initiative**  
Fiscal Year 2000  
**Budget Detail**

LEA\_\_\_\_\_

Project Code: CSR\_ \_ \_ \_ -00

EXPENDITURE CATEGORIES			BUDGET	JUSTIFICATION CODES
EXPENDITURE CATEGORY	FUNCTION/OBJECT CODES	DESCRIPTION/ITEMIZATION		

LEA-Business Administrator Signature\_\_\_\_\_ Date\_\_\_\_\_

## **DIRECTIONS FOR COMPLETING BUDGET DETAIL**

- Complete the LEA Name and Project Code.
- List the budget categories and function/object codes in the same order as they appear on the Budget Statement.

**Note:**      \* Categorize costs according to the Uniform Minimum Chart of Accounts.  
              \* For approved schoolwide programs, list the individual school and the total amount of funds allocated to that school.

- List/describe the item(s) to be funded in each category.
- Enter from the Total column of the Budget Statement page the amount budgeted for each category.

New Jersey Department of Education  
**Class-Size Reduction Initiative**  
Fiscal Year 2000

SUBMIT TO COUNTY  
OFFICE OF EDUCATION  
AND OGMD ONLY IF LEA  
WAIVER REQUEST IS THE  
SAME AS NJDOE WAIVER.

**LEA WAIVER REQUEST**

LEA: \_\_\_\_\_

PROJECT CODE: CSR - \_\_\_\_ -00

**Allocation amount:** \$\_\_\_\_\_

In accordance with Section 307 (b)(B)(2), any LEA that receives an allocation of less than the starting salary of a new teacher must, for the purposes of providing services under Title VI, Class-Size Reduction, form a consortium with another LEA to be eligible to participate. The amount of funds contributed to the consortium by all participating LEAs must be equal to or more than the starting salary of a new teacher.

I am applying to the United States Department of Education to waive the following requirement for the \_\_\_\_\_ Board of Education.

**Statutory or regulatory requirement to be waived:**

**Reason for requesting this waiver and expected goals to be achieved (attach additional pages if necessary):**

Chief School Administrator (Signature): \_\_\_\_\_

Date:\_\_\_\_\_

## **DIRECTIONS FOR COMPLETING LEA WAIVER REQUEST**

### ***PARTICIPATE IN NJDOE WAIVER REQUEST***

NJDOE has submitted a waiver to the USDOE (see attached). If your district would like to participate in this waiver, submit the attached LEA Waiver Request Form to OGMD and your County Office of Education.

- ◆ Complete and submit this LEA Waiver Request to the NJDOE and your County Office of Education by **July 15, 1999** in lieu of the CSR Application.
- ◆ Do not submit the CSR application until your LEA receives written notice from NJDOE that the waiver request has been approved.

### ***REQUESTING WAIVER OTHER THAN NJDOE WAIVER***

If your district is requesting to waive a requirement other than the one submitted by the NJDOE, your district must follow the waiver process indicated in the FY 2000 IASA Guidelines, Section VII, pages 12 and 13.

- ◆ The waiver request must be submitted to your County Office of Education and OGMD by **August 13, 1999**.
- ◆ Do not submit the CSR application until your LEA receives approval from the USDOE.
- ◆ CSR Application must include waiver approval.

**New Jersey Department of Education  
Improving America's Schools Act (IASA)  
Class-Size Reduction Initiative  
Fiscal Year 2000**

**LEA ALLOCATION REFUSAL**

**LEA Code:**   \_\_ \_\_ \_\_ \_\_

The \_\_\_\_\_ Board of Education on \_\_\_\_\_(date)  
hereby resolves not to apply for the funds allocated under the Class-Size Reduction Initiative for  
Fiscal Year 2000:

<b>Class-Size Reduction Initiative</b>	<b>Allocation Amount: \$</b> _____
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It is understood that this refusal to accept funds for Fiscal Year 2000 will not prevent the district  
from applying for or receiving its allocation for any subsequent year.

\_\_\_\_\_  
Chief School Administrator Signature

\_\_\_\_\_  
Board Secretary Signature

\_\_\_\_\_  
Board Approval Date

## Class-Size Reduction Program: Early Implementation Report

**Instructions:** Complete a separate form for each LEA that receives funding. Submit information on a rolling basis as your SEA makes awards to LEAs. States are asked to report information on this form to: Westat. Data can be transmitted electronically by e-mail to [csr@westat.com](mailto:csr@westat.com) or by entering the data directly onto this form at Westat's web page at [csr.westat.com](http://csr.westat.com). The information also can be faxed to Westat at 301-294-4475 or mailed to 1650 Research Boulevard, Rockville, Maryland 20850. Please mark mailings and faxes "ATTN: CSR." Provide as much contact information as possible for LEAs and schools.

LEA Information																	
1. District name:				4. District is a member of a consortium to receive and use these funds? <b>Yes</b> <b>No</b>					8. Award amount to be spent on administration:								
2. District NCES ID:				5. Award period: (MM/YYYY) ____ / _____ to ____ / _____					9. Award amount to be spent on recruiting, hiring, and training additional teachers:								
3. District contact name, phone number, e-mail address:				6. Total award amount:					10. Award amount for other expenses (testing, professional development):								
				7. Award amount to be spent on additional teacher salaries:					11. How does your district measure class size (circle one)? <b>Average</b> <b>Maximum</b>								
Individual School Information (complete for schools in the LEA above who will hire teachers through the program)																	
12. School name and contact name, phone number, and e-mail address	13. Grade span	14. Poverty rate <sup>1</sup>	15. Award amount	16. Report the number of additional teachers to be hired using these funds, by teacher type and grade <sup>2</sup> (write in "0" for teacher types/grades where no teachers will be hired using these funds)					For grades with hires planned using these funds:								
									17. <b>Estimate</b> the average or maximum number of students per class expected in 1999-2000 <b>Without</b> CSR Funds <sup>3</sup>						18. <b>Estimate</b> the average or maximum number of students per class expected in 1999-2000 <b>With</b> CSR Funds <sup>3</sup>		
				Teacher type	1st grade	2nd grade	3rd grade	Other grades	1st grade	2nd grade	3rd grade	1st grade	2nd grade	3rd grade			
				Regular													
				Special Education													
				Regular													
				Special Education													

OMB Clearance No.: 1810-0618 Expiration Date: 09/30/1999

<sup>1</sup> Percent of students in school who qualify for free or reduced-price lunch.

<sup>2</sup> Include any class that combines students from more than one grade in the column corresponding to the lowest grade contained in that class.

<sup>3</sup> To calculate the average number of students per class in a grade, divide the total number of students in that grade by the total number of classes for that grade. To report the maximum for that grade, write in the number of students in the largest class in that grade. See the footnote above for instruction on how to treat combined classes.